

APPLICATION FOR EMPLOYMENT

Human Resources Department
Civic Center Complex
350 Kimbark Street
Longmont, CO 80501
TELEPHONE: (303) 651-8609
FAX: (303) 651-8973
WEB SITE: <http://www.longmontcolorado.gov>



PLEASE READ THIS BEFORE FILLING OUT THE APPLICATION FORM

(Español) Si tiene preguntas al llenar esta aplicación, llame a la Oficina de Recursos Humanos al (303) 651-8609.
If you have questions completing this application, contact the Human Resources Department at (303) 651-8609.

Submit a new application for each position for which you are applying. **Resumes are not accepted in lieu of an application**, but may be attached for supplemental information. **Submit the application directly to the Human Resources Department by 5:00 pm on the closing date noted on the job announcement.**

This application form is an important part of the employment process. Consideration for any position is initially based on an evaluation of the application. False, incomplete, or inaccurate information is cause for disqualification or termination. Any or all information may be verified. Please type or complete in ink as neatly and clearly as possible. Answer all questions to the best of your knowledge. You may provide as much detail as you wish by adding extra sheets of information or a resume. We consider applicants for all positions without regard to race, color, creed, religion, sex, age, sexual orientation, national origin, ancestry, veteran status, disability or other non-merit factors, except for bona fide occupational reasons. The City of Longmont is a drug-free workplace. All employment offers are subject to successful completion of substance screening.

Name _____
Last First MI

Present mailing address _____
Number & Street City State Zip

Telephone Number (Home) _____ (Business/Message) _____

E-Mail address if applicable _____

Requisition number and title of position for which you are applying: _____
Requisition number Title

1. Have you ever been convicted of any violation of law (except for minor traffic violations not involving alcohol)? For the purpose of this question, "convicted" means: convicted by a judge or jury, forfeited any bail, bond, or other security deposited to secure appearance of a person charged with a felony or misdemeanor, paid a fine, entered a plea of nolo contendere, or received a deferred or suspended sentence by a court. Note: a "yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying will also be considered. • Yes • No If yes, please explain _____

2. If hired, can you provide proof of your eligibility to legally work in the United States prior to beginning work? • Yes • No

3. Are you under the age of 18? • Yes • No If yes, list date of birth _____

EDUCATION - SKILLS - ABILITIES

TYPE OF SCHOOL	NAME, CITY & STATE	YEARS ATTENDED From/To	CIRCLE HIGHEST YEAR COMPLETED	DIPLOMA, GED OR DEGREE	LIST DEGREE and/or AREA OF CONCENTRATION
High School			9 10	Yes <input type="checkbox"/> No <input type="checkbox"/>	
			11 12		
College (Undergrad)		To	1 2	Yes <input type="checkbox"/> No <input type="checkbox"/>	
			3 4		
		To	1 2	Yes <input type="checkbox"/> No <input type="checkbox"/>	
			3 4		
College (Grad)		To	1 2	Yes <input type="checkbox"/> No <input type="checkbox"/>	
			3 4		
Trade School		To	1 2	Yes <input type="checkbox"/> No <input type="checkbox"/>	
			3 4		

Apprenticeships, correspondence courses and additional training not shown above:

Military Service: Branch of service _____ Dates of service _____

LICENSES AND CERTIFICATIONS:

Valid driver's license? Yes ☐ No ☐ State _____ License # _____ Expiration Date _____ Class _____

Have you had your driver's license suspended or revoked in the last five years? If so, please explain _____

Other licenses or certifications (if relevant to job): Profession/Trade _____

Level _____ Issued by _____ Expiration date _____

SPECIAL SKILLS

Please check any of the following skills you possess

Office Skills: Computer ☐

List systems, software & knowledge level

Typing/keyboarding ☐ Speed _____ WPM 10-key by touch ☐ Transcription ☐ Other _____

Bilingual Skills: Verbal _____ Written _____

OTHER KNOWLEDGE SKILLS AND ABILITIES RELEVANT TO POSITION FOR WHICH YOU ARE APPLYING:

WORK HISTORY

EMPLOYMENT RECORD. List below your complete work history starting with your present position and working backwards through your experience. Include military service and, if you wish, volunteer work. **This section must be filled in completely, even if a resume is attached.** Attach additional sheets if necessary and a resume if you desire.

(1) Present or last employer _____ From _____ Mo _____ Yr _____ To _____ Mo _____ Yr _____
Address _____ City _____ State _____ Zip _____
Type of Business _____ Telephone () _____ Supervisor _____
Starting Position Title _____ Last Position Title _____ Last Salary _____
Description of duties _____

Reason for leaving or Seeking other employment _____

(2) Previous employer _____ From _____ Mo _____ Yr _____ To _____ Mo _____ Yr _____
Address _____ City _____ State _____ Zip _____
Type of Business _____ Telephone () _____ Supervisor _____
Starting Position Title _____ Last Position Title _____ Last Salary _____
Description of duties _____

Reason for leaving _____

(3) Previous employer _____ From _____ Mo _____ Yr _____ To _____ Mo _____ Yr _____
Address _____ City _____ State _____ Zip _____
Type of Business _____ Telephone () _____ Supervisor _____
Starting Position Title _____ Last Position Title _____ Last Salary _____
Description of duties _____

Reason for leaving _____

(4) Previous employer _____ From _____ Mo _____ Yr _____ To _____ Mo _____ Yr _____
Address _____ City _____ State _____ Zip _____
Type of Business _____ Telephone () _____ Supervisor _____
Starting Position Title _____ Last Position Title _____ Last Salary _____
Description of duties _____

Reason for leaving _____

(5) Previous employer Address _____	From	Mo _____	Yr _____	To	Mo _____	Yr _____
City _____				State _____		Zip _____

Type of Business _____ Telephone () _____ Supervisor _____

Starting Position Title _____ Last Position Title _____ Last Salary _____

Description of duties _____

Reason for leaving _____

ATTACH ADDITIONAL SHEETS IF NECESSARY TO COMPLETE WORK HISTORY.

May we contact your present employer about your work? Yes ☐ No ☐

May we contact your previous employer(s) about your work? Yes ☐ No ☐

List any other name under which you have been employed _____

Federal law requires that all persons hired must submit satisfactory proof of employment authorization and identity within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

I have read and understand the complete application and I certify that, to the best of my knowledge, the statements made in my application and any attachments are true and complete. I understand that if employed, false statements or omissions in the application could be considered sufficient cause for dismissal. I am aware that the City of Longmont has a payroll direct deposit requirement for employment. If employed, I can supply the correct documentation for direct deposit.

Signature _____

Date _____

Where did you learn of this position?

____ City of Longmont H uman Resources	____ Longmont Times Call
____ Other C ity of Longmont Dept. Please specify _____	____ Denver Post
____ Other G overnmental Agency Please specify _____	____ Boulder Camera
____ Cable TV	____ Professional Journal
____ Job Line	____ Internet (Web Site) Please specify _____
____ Friend/Relative *	____ Other Please specify _____

*The City of Longmont has a nepotism policy which prohibits employment of a person in a position which would result in such a person directly, or through the departmental chain of command, supervising or receiving supervision from a relative by blood or by marriage.

EEO INFORMATION FORM

This page will be separated from the rest of the employment application when it is received by the Human Resources Department. **The information provided will have no bearing upon your consideration for employment.** The information is only used to assist us in complying with Federal Equal Employment Opportunity record keeping and reporting requirements. The City of Longmont considers applicants for all positions without regard to race, color, creed, religion, sex, national origin, ancestry, sexual orientation, age, veteran status, disability or any other legally protected status. We are an Equal Opportunity Employer.

Position Applied for _____ Req # _____

Name _____

Address _____

Date of Birth _____ Sex – Male _____ or Female _____

Race or ethnic identity: Optional Information

White _____ Hispanic _____ Asian/Pacific Islander _____

American Indian/Alaskan Native _____ Black _____